## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000251041

Entity Name: CP TOURS LICENSING LLC

**Current Principal Place of Business:** 

220 SW 3RD AVENUE

FORT LAUDERDALE. FL 33312

**Current Mailing Address:** 

220 SW 3RD AVENUE

FORT LAUDERDALE. FL 33312 US

FEI Number: 83-2520025 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAERTING, MICHAEL 220 SW 3RD AVENUE

FORT LAUDERDALE, FL 33312 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL HAERTING 02/11/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR, CFO Title MGR, PRESIDENT HAERTING, MICHAEL BROUSSEAU, AILEEN Name Name 136 NE 19TH COURT 136 NE 19TH COURT Address Address

City-State-Zip: WILTON MANORS FL 33305 City-State-Zip: WILTON MANORS FL 33305

Title MGR. VP Title MGR. VP

Name HAERTING, CHRISTOPHER Name FERNANDEZ, SIMON **1517 SW 19TH AVENUE** 10380 SW 28TH STREET Address Address

FORT LAUDERDALE FL 33312 City-State-Zip: MIAMI FL 33165 City-State-Zip:

Title **AMBR** Title MGRM

Name CP TOURS, LLC Name CP TOURS, LLC

Address 220 SW 3RD AVENUE Address 220 SW 3RD AVENUE

FORT LAUDERDALE FL 33312 City-State-Zip: FORT LAUDERDALE FL 33312 City-State-Zip:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL HAERTING

**CFO** 

02/11/2020

**FILED** Feb 11, 2020

**Secretary of State** 

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